





ATTENTION SHIPPERS

FREIGHT CHARGES ARE PREPAID ON THIS BILL OF LADING UNLESS MARKED COLLECT.

44

**STRAIGHT BILL OF LADING**

ORIGINAL - NOT NEGOTIABLE

Pro # 3b50Shipper No. 1943

Carrier No. \_\_\_\_\_

Page 1 of 1

AUGUST TRANSPORT

(Name of carrier)

(SCAC)

Date 8/26/10

On Domestic Domestic shipments, the letters "C.O.D." must appear before consignee's name or as otherwise provided in Item 430, Sec. I.

**TO:** Consignee JAMES GY  
 Street S. CHESTER ST  
 City NEW CUMBERLAND State WV Zip Code 26047

**FROM:** Shipper ROME METALS  
 Street 499 DELAWARE AVE.  
 City ROCHESTER State PA Zip Code 15074  
 24 hr. Emergency Contact Tel. No. 304 - 723 - 6501

Route

| No. of Units & Container Type | BASIC DESCRIPTION<br>Proper Shipping Name, Hazard Class,<br>Identification Number (UN or NA), Packing Group, per 172.101, 172.202, 172.203 | TOTAL QUANTITY<br>(Weight, Volume,<br>'Gallons, etc.) | WEIGHT<br>(Subject to<br>Correction) | RATE | CHARGES<br>(For Carrier<br>Use Only) |
|-------------------------------|--|---|--------------------------------------|------|--------------------------------------|
|                               | HAZARDOUS GROUP 4.2, ID - UN1932   | 1000 KGS  |                                      |      |                                      |
|                               | PACKAGING GROUP III LABELS REQUIRED  | 40,060  |                                      |      |                                      |
|                               | SPONTANEOUSLY COMBUSTIBLE  |   |                                      |      |                                      |
|                               | EMERGENCY RESPONSE: 800 - 424 - 9300   |   |                                      |      |                                      |
| 10 DRUMS X                    | ZIRCONIUM SCRAP SKIDS  |   |                                      |      |                                      |

**PLACARDS TENDERED: YES  NO** 

Note - (1) Where the rate is dependent on value, shipper is required to state specifically in writing the agreed or declared value of his property, as follows: "The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$100,000 per unit".  
 (2) Where the applicable bill of lading provides specific limitations of the carrier's liability absent a clause or a value declaration by the shipper and the shipper does not increase the carrier's liability or declare a value, the carrier's liability shall be limited to the extent provided by such provisions. See MARSHALL 172.  
 (3) Consignee is required special care or attention in handling or storing until so marked and packaged as to ensure safe transportation. See Section 2(e) of Item 430, Bills of Lading, Freight Bills and Statements of Charges and Section 1(e) of the Contract Terms and Conditions for a full of such articles.

I hereby declare that the contents of the containers are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled placards, and are in all respects in proper condition for transport according to applicable International and national governmental regulations.

Signature

REMIT Wan Chang C/o Continental Traffic  
C.O.D. TO: \$100 regular Ave - 15th Floor  
ADDRESS: Memphis, TNC.O.D. Amount \$100  
 PREPAID  COLLECT  S.Subject to Section 7 of the conditions. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other and charges.TOTAL CHARGES \$  
FREIGHT CHARGES  
 PREPAID  COLLECT  S.  
 CARRIER CHARGES  
 EXCEPT WHEN BASED ON TOTAL CHARGES

destination and as to each party of any loss incurred after any and property, but every service to be performed by carrier that is subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Carrier hereby certifies that it is familiar with all the trading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

SHIPPER ROME METALS

PER

Shannon O'Rourke

CARRIER

AUGUST TRANSPORT  
PER Non Nuchene #7-353

DATE

8/26/10

Permanent post office address of shipper:

PRINTED OR FAXED BY  
SHIPPER OR  
CARRIERFAXED OR  
SIGNED

STYLE F100-4 Labelmaster An American Labelmark Co., Chicago, IL 60648 200-621-5808



ATTENTION SHIPPERS!

FREIGHT CHARGES ARE PREPAID ON THIS BILL OF LADING UNLESS MARKED COLLECT.

STRAIGHT BILL OF LADING  
ORIGINAL - NOT NEGOTIABLEShipper No. 1926Pro # 3174

Carrier No. \_\_\_\_\_

Page 1 of 1

AU GUST TRANSPORT

(Name of carrier)

(SCAC)

Date 7-19-10

On Collection Delivery documents, the letter COD must appear before consignee's name or an otherwise printed item (ex. Sec. 1).

TO:

Consignee: AL SolutionsStreet: S. CHESTER STCity NEW CUMBERLANDState PAZip Code 26047FROM:  
Shipper

ROME METALS

Street: 1699 DELAWARE AVECity: ROCHESTERState: PAZip Code: 1507424 hr. Emergency Contact Tel. No. 304-723-6501Vehicle  
Number

Route

| No. of Units & Container Type | BASIC DESCRIPTION<br>Proper Shipping Name, Hazard Class,<br>Identification Number (UN or NA), Packing Group, per 172.101, 172.202, 172.203 | TOTAL QUANTITY<br>(Weight, Volume,<br>Gallons, etc.) | WEIGHT<br>(Subject to<br>Correction) | RATE | CHARGES<br>(For Carrier<br>Use Only) |
|-------------------------------|--|--|--------------------------------------|------|--------------------------------------|
|                               | HAZARDOUS GROUP 4.2, ID - UN1932   | LOAD AS  |                                      |      |                                      |
|                               | PACKAGING GROUP III LABELS REQUIRED  | 40,000   |                                      |      |                                      |
|                               | SPONTANEOUSLY COMBUSTIBLE  |  |                                      |      |                                      |
|                               | EMERGENCY RESPONSE: 800-424-9300   |  |                                      |      |                                      |
| 10 DRUMS                      | X ZIRCONIUM SCRAP  | 3 SKIDS(H)   |                                      |      |                                      |

PLACARDS TENDERED: YES  NO 

Note - (1) Where the risk is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property, as follows: "The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_.

(2) Where the agreed value is not stated specifically in writing the carrier's liability absent a written or verbal deduction by the shipper and the shipper does not reduce the carrier's liability by doing so, the carrier's liability shall be limited to the extent provided by each provision, See IAPMO form 112.

(3) Consigned items requiring special care or attention in handling or storing must be examined and packaged as to insure safe transportation. See Section 2(e) of Item 501, Bill of Lading, Freight Bills and Statements of Charge and Section 1(e) of the Contract Form and Conditions for a list of such services.

RECORDED, subject to examination and verification as to the date of the issue of this Bill of Lading, on a copy of which the instrument is attached as noted below, is the condition of property at time of loading, and is also recorded, and is also indicated above, which reads: "The named carrier has been selected by the consignor to make delivery of the property in accordance with the terms of this contract, and the consignor agrees to pay to the named carrier on the date of issue of this Bill of Lading all costs and expenses, if any, incurred by the named carrier in the performance of its duty to make delivery of the property, except for any portion of such costs to be

REMIT Wah Chang c/o Continented Traffic  
O.D.O. TO: 1500 Poplar Ave - 15th Floor  
ADDRESS: memphis, TN 38134 O.D.O. FEE:   
COD  AMT: \$  PREPAID  COLLECT  SSubject to Section 7 of the conditions, if this shipment is to be carried to the consignee's address, recourse to the carrier, the consignor and the shipping bureaus.  
The consignor shall bear the cost of this shipment without remittance of freight and all other local charges.

TOTAL CHARGES

S

FREIGHT CHARGES  
 PREPAID  
 COLLECT  
 RATES CHARGED  
BY THE CARRIER

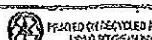
Signature of Consignor

declaration and as to each party to pay for damages in the event of loss, properly, but every service to be performed hereon shall be subject to all the bills of lading terms and conditions in the preceding classification on the date of issuance.

The consignor certifies that he has familiarized himself with the basic terms and conditions in the preceding classification and the additional special conditions are hereby agreed to by the shipper and accepted for these particular consignments.

SHIPPER ROME METALS  
PER Shannon COFFCARRIER AUGUST TRANSPORT  
PER John Wilson #7-783  
DATE 7-19-10

Permanent Post Office address of shipper

PRINTED OR REPRODUCED FROM  
LABELMASTER

STYLE F160-4 Labelmaster, An American Labelmark Co., Chicago, IL 60640 800-621-58



JUL-14-2011 11:00  
7242266166

ROME ZELIE  
TCH SHIPPING AND CON

(Name of Carrier)

724 452 4561 P.01/01

12:19:41 p.m. 07-14-2011

1/1

LINCS  
(SCAC)

MUST SHOW ON FREI

720036

CARRIER

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading.

AT  
ROCHESTER PA  
FROM



CAR OR VEHICLE INITIALS AND NUMBER

The property below is apparent good order, except as noted (contents and con-  
tainer unknown), marked, consigned, and described as indicated below when a  
carrier being undertaken throughout the contract to transport any person or cargo  
of the property under the contract agrees to carry to the usual place of delivery;  
on his route, otherwise to deliver to another carrier on the route to said destination,  
or to each carrier of all or any of said property over all or any portion of said route  
as to each party at any time hereafter in all or any of said property, that every car-  
rier under shall be subject to all the terms and conditions of the Uniform Port  
Lading Act forth (1) in Uniform Freight Classification in effect on the date hereof; 1  
year exemption or (2) in the applicable motor carrier classification or tariff if the  
equipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the  
form in the classification or tariff which governs the transportation of the shipment  
and conditions the hereby agreed to by the shipper and accepted for himself and his

FREIGHT TERMS

Prepaid Collect TN/4Party

Subject to section 7 of Conditions of  
applicable bill of lading, if this shipment is to  
be delivered to the consignee without  
receipt on the consignor, the consignor shall  
sign the following statement:

The carrier shall not make delivery of this  
shipment without payment of freight and all  
other lawful charges.

Allegheny Technologies, Inc.  
(The signature hereack  
amount prepaid.)

(Signature of consignee) Charges Advanced:

per

THIS SHIPMENT IS CORRECTLY DESCRIBED, CORRECT  
WEIGHT IS AS SHOWN SUBJECT TO VERIFICATION BY  
THE GOVERNING WEIGHING AND INSPECTION BODY  
ACCORDING TO AGREEMENT.

Allegheny Technologies, Inc.

SHIPPER  
Shipper's imprint in lieu of stamp now in part of bill of lading  
Approved by Interstate Commerce Commission

KIND OF PACKAGE, DESCRIPTION OF ARTICLES,  
SPECIAL MARKS, AND EXCEPTIONS

'WEIGHT  
(Subject to Carr.)

PICKUP AT: ATI Precision Finishing  
499 University Ave  
Rochester, PA 15074  
DELIVER TO: ATI Wah Chang  
1600 Old Salem Rd. NE  
Albany, OR 97321

PICKUP DATE/TIME: 7/13/2011 7:00:00 AM -  
7/15/2011 3:00:00 PM EST

DELIVERY DATE/TIME:

Load Number Item Description No. Packages

Comments:  
Pickup Date From 7/13/2011 7:00 AM EST  
Pickup Date To 7/15/2011 3:00 PM EST

Zr Grindings- Wet

Damaged Zr  
Grindings

40

40,000 lbs.

Comments:

Sub Total Weight: 40,000 lbs.

TOTAL OVERALL WEIGHT: 40,000 lbs.

Comments: Material must move under Flammable placard and must be totally tarped

MOTOR VEHICLE SHIPMENTS - LOADED AND BRACED IN ACCORDANCE WITH TRUCK DRIVERS INSTRUCTIONS  
CARRIER MUST PROTECT SHIPMENT FROM WEATHER IN TRANSIT

CARRIER (Signature Required)

Date

PER

PLEASE RENDER PAYMENT BILL TO:

TOTAL P.01

Form Approved, OMB No. 2050-0039

Print or type. (Form designed for use on 8 1/2 (12-pitch) typewriter.)

|   |  |   |                   |   |   |                                       |                                |                     |                     |
|---|--|---|-------------------|---|---|---------------------------------------|--------------------------------|---------------------|---------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST  |  | 1. Generator ID Number<br>ORD 050955848   | 2. Page 1 of<br>1 | 3. Emergency Response Phone<br>(877) 818-0087 | 4. Manifest Tracking Number<br><b>000167371 VES</b> |                                       |                                |                     |                     |
| 5. Generator's Name and Mailing Address<br>WAH CHANG - NORTH<br>PO BOX 460<br>ATTN: RYAN BODILY<br>ALBANY, OR 973210460   |  | Generator's Site Address (if different than mailing address)<br>WAH CHANG - NORTH<br>PO BOX 460<br>(1600 OLD SALEM ROAD NE)<br>ALBANY, OR 973210460 |                   |   |   |                                       |                                |                     |                     |
| 6. Generator's Phone<br>541 812-7003  |  | U.S. EPA ID Number<br><b>K 9 0 0 0 0 3 3 6 8 9 1</b>  |                   |   |   |                                       |                                |                     |                     |
| 7. Transporter 1 Company Name<br>SAVANNAH TRANSPORT   |  | U.S. EPA ID Number<br><b> </b>  |                   |   |   |                                       |                                |                     |                     |
| 8. Designated Facility Name and Site Address<br>HERITAGE-WI, INC.<br>1250 SAINT GEORGE STREET<br>330 365-7326 EAST LIVERPOOL, OH 43920  |  | U.S. EPA ID Number<br><b> </b>  |                   |   |   |                                       |                                |                     |                     |
| 9a. Facility's Phone<br>330 365-7326  |  | 10. Coolants<br>No. Type<br>040 DM 43,180 P   |                   |   |   |                                       |                                |                     |                     |
| 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))<br><b>X UN3178, FLAMMABLE SOLID, INORGANIC, n.o.s. (ZIRCONIUM, HAFNIUM), 4.1, III</b>  |  | 11. Total Quantity<br>43,180  |                   |   |   |                                       |                                |                     |                     |
| 9c. HM  |  | 12. Unit Wt./Vol.<br>P  |                   |   |   |                                       |                                |                     |                     |
| 9d. 2   |  |   |                   |   |   |                                       |                                |                     |                     |
| 9e. 3   |  |   |                   |   |   |                                       |                                |                     |                     |
| 9f. 4   |  |   |                   |   |   |                                       |                                |                     |                     |
| 14. Special Handling Instructions and Additional Information ER Service Contracted by VESTE + 1) ERG:133 W:434443 A:WT02796-1<br>Victoria WT<br><b>T101656</b>  |  |   |                   |   |   |                                       |                                |                     |                     |
| 15. GENERATOR/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. |  |   |                   |   |   |                                       |                                |                     |                     |
| Generator/Offeror's Printed/Typed Name<br><b>FRANK HAWKINS</b>  |  | Signature<br><i>Frank Hawkins</i>   |                   | Month<br><b>12</b>                            | Day<br><b>16</b>                                    | Year<br><b>2011</b>                   |                                |                     |                     |
| 16. International Shipments<br><input type="checkbox"/> Import to U.S.  |  | <input type="checkbox"/> Export from U.S.   |                   | Port of entry/exit:<br>Date leaving U.S.A.    |   |                                       |                                |                     |                     |
| Transporter signature (for exports only):   |  |   |                   |   |   |                                       |                                |                     |                     |
| 17. Transporter Acknowledgment of Receipt of Materials<br>Transporter 1 Printed/Typed Name<br><b>SAXON CASTLE</b>   |  |   |                   |   |   | Signature<br><i>Saxon Castle</i>      | Month<br><b>12</b>             | Day<br><b>16</b>    | Year<br><b>2011</b> |
| Transporter 2 Printed/Typed Name<br><b> </b>  |  | Signature<br><i> </i>   |                   | Month<br><b> </b>                             | Day<br><b> </b>                                     | Year<br><b> </b>                      |                                |                     |                     |
| 18. Discrepancy<br>18a. Discrepancy Indication Specs<br><input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection   |  |   |                   |   |   | Manifest Reference Number<br><b> </b> | U.S. EPA ID Number<br><b> </b> |                     |                     |
| 18b. Alternate Facility (or Generator)<br>Facility's Phone<br>18c. Signature of Alternate Facility (or Generator)   |  |   |                   |   |   | Month<br><b> </b>                     | Day<br><b> </b>                | Year<br><b> </b>    |                     |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>1. <b>H040</b> 2. <b> </b> 3. <b> </b> 4. <b> </b>   |  |   |                   |   |   | Signature<br><i> </i>                 |                                |                     |                     |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 19<br>Printed/Typed Name<br><b>Rebekah Davis</b>   |  |   |                   |   |   | Month<br><b>12</b>                    | Day<br><b>16</b>               | Year<br><b>2011</b> |                     |
| DESIGNATED FACILITY TO DESTINATION STATE, IF REQUIRED   |  |   |                   |   |   |                                       |                                |                     |                     |